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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

	Attorney Docket No.		No.	US020065A						
	First Inventor GEO			ORGE A. BROCK-FISHER						
Title CONTRAST-AGENT ENHANCED COLOR-FLOW IMAGING										
	Expres	s Mail Lat	el No	EV3120137780ate AUG. 5	2003					

1	APPLICATION ELE	MENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application							
See MPEP o	hapter 600 concerning utility patent a	oplication contents.	ADDITEO	Alexandria,	VA 22313-1450	0				
1. S F (8 2. A A S S C 4. A A S C A A A A A A A A A A A A A A A A	Fig. Transmittal Form (e.g., PTO). Sobret a respirate of a spirate for less proposed a sobret a respirate of a spirate for less popularies, proposed a spirate of the spira	SB/17) cessing) s. lal Pages 32] ons R & D	8. Nuceomid 8. Nuceomid (if applica a.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies): or ii. paper ACCOMPANYING APPLICATIONS PARTS 9. ASSignment Papers (cover sheet & document(s)) 10. 37 C.F. R.§3.73(b) Statement Power of (when there is an assignee) Attomey 11. English Translation Document (if applicable)						
5. Oath or I		al Pages 3	Sta	tement (IDS)/PTO-144						
a. 🔲	Newly executed (original or copy	,	1 =	eliminary Amendment						
b. ⊠	Copy from a prior application (37 (for a continuation/divisional with		(SI	turn Receipt Postcard i hould be specifically ite						
i. C	DELETION OF INVENTOR	S)		rtified Copy of Priority I foreign priority is claim						
	Signed statement attached deleting named in the prior application, see 3		16. No	16. Nonpublication Request under 35 U.S.C. 122						
6. App	1.63(d)(2) and 1.33(b). Dication Data Sheet. See 37 CFF	4.70		(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
6. [App	olication Data Sheet. See 37 CFF	(1./6	17. 🔲 Oth	17. Other:						
or in an App Contin Prior app For CONTIN under Box 5	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CPR 1.76: © Continuation Divisional Continuation-in-part (CIP) of prior application No: 10/134.194 Prior application information: Examiner M.M. PATEL Prior application information: Examiner M.M. PATEL For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an earth or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be reliefue upon when a portion has been inadvertently omitted from the submitted application.									
		17. CORRESPO	NDENCE ADDR	ESS						
☐ Customer Number or Bar Code Laber ☐ Correspondence address below PATENT TRADEMARK OFFICE (Insert Customer No. or Affact her code label hero) Correspondence address below										
Name										
Address										
City		State		Zip Code		- 1				
Country		Telephone		Fax						
Name (Pri	int/Type) JOHN YODOPIA	41	Registration No. (Attorney/Agent) 36,299							
Signature	109	W		Date	AUGUST 🛶 , 2003					

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FFF TDANION	ITTAI	Complete if Known						
FEE TRANSM		Application Number	UNASSIGNED CONCURRENTLY					
for FY 200	02	Filing Date						
		First Named Inventor	GEORGE A. BROCK-FISHER	_				
Palent fees are subject to annua	I revision.	Examiner Name	ASSIGNED					
		Group / Art Unit	UNASSIGNED					
TOTAL AMOUNT OF PAYMENT (\$)	740.00	Attorney Docket No.	U\$020065A					

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The Commissioner is hereby authorized to charge						3. ADDITIONAL FEES			TEL ONLOGERITION (CONTINUES)			
1. 🗠		indicated fees and credit any over payments to:				Large Entity			Small Entity			
Deposit			Fee Code	Fee (\$)	Fee Code	Fee (\$)		ee ald				
				105	130	205	65	Surcharge - late filing fee or oath				
						127	50	227	25	Surcharge - late provisional filing fee		
Deposit						l				or cover sheet.	_	
Account Philips Research 13				139	130	139	130	Non-English specification	_			
Mar							147	2,520 920*	147	2,520 920*	For filing a request for reexamination	
			6 and 1.								Requesting publication of SIR prior to Examiner action	
	See 37 (CFR 1.27		y status.			113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2. 🗆	Payme	ent Enclo	isea:				115	110	215	55	Extension for reply within first month	\neg
	Check	□ c	edit card	☐ Money Order	☐ Other		116	400	216	200	Extension for reply within second month	
			FFF C			_	117	920	217	460	Extension for reply within third month	
FEE CALCULATION 1. BASIC FILING FEE						118	1,440	218	720	Extension for reply within fourth month		
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101	740	201	(\$) 370	Utility filing fee	ree raid	٦.	120	320	220	160	Filing a brief in support of an appeal	\Box
106	330	206	165	Design filing fee		-	121	280	221	140	Request for oral hearing	
107	510	207	255	Plant filing fee		_	138	1,510	138	1,510	Petition to institute a public use proceeding	
108	740	208	370	Reissue filing fe		4	140	110	240	55	Petition to revive – unavoidable	
114	160	214	80	Provisional fillin	g fee	J	141	1,280	241	640	Petition to revive – unintentional	
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2. EXTR	A CLA	M FEES					144	620	244	310	Plant issue fee	_
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Total Claim	is [٦.		× (= 0	٦	123	50	123	50	Processing fee under 37 CFR 1.17 (q)	
Independent Claims	٦,	٦.		0 x	= 0	Ī	126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent	_			\ ×	= 0	i	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large	Entity		Entit	у .			146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descrip			149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	\neg
103	18 84	203	9	Claims in ex			179	740	279	370		\neg
102 104	84 280	202	42 140		claims in excess of 3		•				Request for Continued Examination (RCE)	_
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 "Reissue independent claims over original patent					169	900	169	900	Request for expedited examination of a design application			
110 18 210 9 ** Reissue dalms in excess of 20 and over original patent						Other fee (specify)						
	SUBTOTAL (2) (\$) 740.00										7	
**or numb	ber previo	ously paid	, if greate	For Reissues, s	e above	_		Jos dy Da	ON FEEL	g. de r	aid SUBTOTAL (3) (\$) 740.00	

SUBMITTED BY Complete (if applicable)											
Name (Print/Type)	JOHN VODOPA	Registration No. Attorney/Agent)	36,299	Telephone	(914) 333-9627						
Signature	1919	Date	AUGUST 5	, 2003							

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